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Musculoskeletal physiotherapy service standards

The delivery of musculoskeletal (MSK) physiotherapy services in the UK for adults of 16 years and over

Version for users of MSK services

Introduction

What are the Musculoskeletal (MSK) Physiotherapy Service Standards? We need to ensure that high standards of physiotherapy treatment and management are the same throughout all public and private MSK physiotherapy services. These standards support services to achieve the best quality of service possible.

Musculoskeletal conditions include those affecting the joints, bones, muscles, the spine and conditions affecting several areas or systems of the body (such as rheumatoid arthritis and connective tissue diseases). Eight quality standards have been drawn up that set out what is good practice, so that people with a MSK condition receive the best possible care and treatment.

These standards cover MSK services for anyone over the age of 16 in the UK and their families and carers. They make sure the physiotherapy treatment and management people receive is based on the best practice and evidence, patient's individual needs and effective referral to other specialists and healthcare workers if needed.

In drawing up these standards, high quality evidence was used, such as that from the National Institute for Health and Care Excellence (NICE). NICE provides national guidance, advice and information services for health, public health and social care professionals.

We have worked with a working group comprising of researchers, health care professionals, service managers and a member of the public, and consulted other professions, groups, charities and people with lived experience of MSK conditions.

Who are these standards for?

- **Physiotherapists to help them improve the quality of treatment and management they provide;**
- **People with a MSK condition so they know what standards of treatment and management they should expect from physiotherapy services;**
- **Providers of MSK services, those groups and organisations and individuals who run services and need to identify appropriate provision;**
- **Those who plan and finance MSK services and need to know what are the best possible services.**

Why do we need Quality Standards?

MSK conditions are very common, affecting almost 19 million people across the UK in the year 2017 and are the leading cause of people living with disability worldwide. MSK conditions resulted in almost 9 million lost working days in the UK in the year 2019/2020 second only to stress, depression or anxiety and account for at least 14% of consultations in primary care.

People with MSK conditions may find different aspects of their lives are affected by their condition. Also, many people with MSK conditions may have more than one long term condition. This can mean managing their health is more complex and can affect their quality of life. MSK conditions are increasing and given that people are living longer we expect the number of those affected to increase for the foreseeable future. MSK physiotherapists are an important professional group who are involved in the triage, assessment, treatment and management of people with MSK conditions.

These quality standards are not just to be seen as targets but are there to improve the day-to-day experience of care for people with MSK conditions. They have been developed using other work from a variety of sources on MSK care.

Quality standards and measures can be used for a range of purposes, including:

- **Measuring the quality of care**
- **Understanding how to improve care**
- **Demonstrating quality of care**
- **Setting priorities for and supporting improvement**

Quality standards also help those who fund MSK services to make better decisions when it comes to funding these services, and they will support people wanting to access services to communicate what they expect from services.

Throughout this document we use the term 'person/people with a MSK condition' to include patients already receiving care as well as those people with a MSK condition that may be self-managing with support or are yet to seek care for their condition.



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Quality standard 1:

Assessment, diagnosis, management planning and review

People who have MSK conditions are offered treatment and management that is timely, thorough and takes into account all of their needs. This means they are involved in shared decisions about their own care, helping to develop a physiotherapy plan designed with them and, in the assessment of how well, or not, the plan has worked.

This means the physiotherapy service will...

- **Carry out and record** a personal assessment, including physical, psychological and social/work/education needs and preferences;
- **Take into account** any other conditions and cultural needs the person has;
- **Involve** other health care specialists if necessary;
- **Will make sure** that any decisions about treatment and follow-up are made together with the person with a MSK condition;
- **Make sure** families and carers are involved in discussions and decision making if the person with a MSK condition wishes;
- **Use technology** including computers and the internet, as appropriate, to monitor, assess and support the person with a MSK condition, but taking into account the preferences of the person;
- **Ensure** that the physiotherapy plan meets the person's needs and uses feedback from patients.

What does this standard mean for me?

- **People with MSK conditions** may experience significant impact on different aspects of their lives as a result of their condition.
- **The assessment, diagnosis, physiotherapy plan and review** consider the person's physical and mental health as well as their social, cultural and work/education needs.
- **It takes into account** all the needs and preferences of the person.
- **Takes account of other conditions** the person may have, such as cardiovascular disease, diabetes, lung disease and frailty and the impact of these on what people can do and how they can manage their own health.
- **Allows for other healthcare professionals** to be involved in assessment and management.
- **There are ways of finding out if people are at risk** of poor results from their particular condition. People with low risk require mostly a supported self-management approach whereas those at higher risk require more intensive treatment. This approach improves outcomes for people and makes best use of healthcare resources.



Quality standard 2:

Personalised physiotherapy

People presenting with MSK conditions are offered, personalised and timely physiotherapy with equal access and tailored to their individual needs, preference and goals.

This means the physiotherapy service will...

- **Make sure** treatment and management is about the whole person, based on their individual needs and includes a personal physiotherapy plan;
- **Use treatment** and management that is the best that is available;
- **Aim to get** people back to their normal activities and roles;
- **Use treatment** and management that is flexible enough to meet the person's needs. This includes the venue, time of appointments and how treatment and management is carried out.

What does this standard mean for me?

- **People with a MSK condition** should expect their physiotherapy to be based on a personalised assessment and physiotherapy plan that is right for them (standard 1).
- **Treatment will also be based on** what is the best current practice and on good quality evidence.
- **Physiotherapy services listen to** and agree with the person with a MSK condition their goals of physiotherapy.
- **Physiotherapy services will aim to help** people to take part in or resume activities that are important for the person. Important activities may include; taking part in education, work and other life roles, such as being a carer, undertaking hobbies and interests and socialising.

- **The type and timing of treatments** (whether in person, or by video, group sessions, individual or home visits) **are decided between the physiotherapy service and the person with a MSK condition and based on good quality evidence and research.**
- **The physiotherapist may use technology**, such as mobile phones, email and apps but will take into account the person's personal preferences, including access to and ability to use technology.

Quality Standard 3:

Supported self-management

People presenting with a MSK condition are offered supported self-management as part of their physiotherapy plan to recognise and develop their capability to manage their own health and wellbeing.

This means the physiotherapy service will...

- **Actively involve the person** with a MSK condition in making decisions about planning their treatment. This is called shared decision making;
- **Take account of how well** the person understands their condition, the limitations of the treatment and management available and the level of support they have when making a self-management plan;
- **Make sure any support** that is offered is based on good quality evidence;
- **Involve family**, carers, and community groups to help support the person, where it is appropriate;
- **Provide the person** with a MSK condition with a self-management plan to help them manage their condition and seek further help if needed.

What does this standard mean for me?

- **Self-management helps people** to manage their own MSK condition and well-being. Supported self-management means physiotherapists work with people to develop their ability to manage their own health and well-being by providing support tailored to their needs.
- **People with a MSK condition** will be involved in developing their self-management plan. The plan will take into account the person's level of willingness and ability to self-manage. A written or digital self-management plan will be provided. This will include information on how to self-manage and when and how to seek further help from health services or practitioners.
- **The person with a MSK condition** should also be provided with information on where they can get help with self-management. This may include local groups, charities and organisations and also, if appropriate, digital resources such as websites and apps.
- **The self-management plan** may involve family, peers, friends and communities of the person with an MSK condition, if the person wants them to be involved.



Quality standard 4:

Communication

Communication with people with MSK conditions is offered in an accessible way, and information is personalised to their needs and preferences.

This means the physiotherapy service will...

- **Communicate with people** with a MSK condition in ways that are accessible, on time and allow the person to share decisions about their treatment;
- **Make sure physiotherapists** have the necessary skills to enable good communication to take place;
- **Help people with MSK** to know what to expect from physiotherapy treatment and to find their way through the health care system;
- **Provide information** in formats/languages that the patient can understand;
- **Involve family members**, carers and other people chosen by the person in communications and in sharing decisions on treatment and care.

What does this standard mean for me?

- **All communication** with the physiotherapy service should be easy to access and understand.
- **Accessible communication**, that takes into account the person's needs and preferences, allows people with a MSK condition to be fully involved in their management. This should also include information to help the person to understand what to expect from the physiotherapy service and the treatment and management pathway (the management pathway is when more than one department or health practitioner is involved).

- **Information from all departments** and staff should be consistent.
- **All communication will take into account** the person's personal preferences for communication, including access to and ability to use technology. The service may use technology, such as mobile phones, email and apps but alternative communication methods will be used if needed.
- **If the patient wishes**, family members, carers and friends can be involved in communication and shared decision making as required.



Quality standard 5:

Integrated management pathways

People with MSK conditions receive equitable, personalised treatment and management that is integrated across all relevant settings and services.

This means the physiotherapy service will...

- **Make sure all people** with MSK conditions have access to services and treatment as outlined in their personal physiotherapy plan;
- **Make sure all treatment** and services are well coordinated and, accurate information is passed between all staff involved;
- **Involve other organisations** such as health services, community services, leisure and charities based on the person's treatment and management plan;
- **Make sure physiotherapy staff** are aware of how to refer patients to other specialists, that appropriate follow up arrangements are put in place and the person knows how urgent care can be accessed;
- **Involve people with MSK conditions**, the public and communities in developing treatment and management pathways and services.

What does this standard mean for me?

- **People with MSK conditions** will receive physiotherapy based on their personalised physiotherapy plan.
- **Treatment and management pathways** for many people with MSK conditions will involve more than one department, service or health care practitioner.

- **Where the pathway does involve** more than one department or practitioner, treatment and management will be coordinated across the pathway. In addition, timely and accurate information will be exchanged between services and practitioners.
- **The physiotherapy workforce** should be directly involved in developing treatment and management pathways for people with MSK conditions.
- **Patients, the public and communities** should also have the opportunity to contribute to the development of treatment and management pathways for people with MSK conditions.



Quality standard 6:

Population health

The physiotherapy workforce is aware of and engages in delivering population health priorities and in promoting preventative MSK strategies to optimise health and well-being and address inequalities.

This means the physiotherapy service will...

- **Work in partnership** with other organisations to help deliver both local and national health priorities;
- **Draw attention to risks** of poor health and work with others to promote prevention and address health inequalities;
- **Use the best available evidence** in promoting health and wellbeing;
- **Work with other organisations** to emphasise the importance of healthy behaviours in managing MSK conditions;
- **Work with other organisations** to promote the importance of improving health in their local communities;
- **Use technology**, as appropriate, to improve health in the wider community.

What does this standard mean for me?

- **A population health approach**, aims to improve health, promote wellbeing and, reduce health inequalities across entire communities, not just those attending for healthcare. Services should support local communities to understand more about achieving and maintaining good MSK health without people needing to attend that service.
- **Physiotherapy services** should actively promote good health and wellbeing for people with MSK conditions and the local community. This includes highlighting those factors that can have a detrimental effect on health and well-being and MSK conditions. Factors that can contribute to health and well-being include diet, weight management, physical activity and smoking.

- **The physiotherapy workforce will promote those factors that will benefit people with MSK conditions.**
- **The service will also work in partnership with organisations to ensure long term MSK health is recognised as an important part of population health.**
- **Factors that can contribute to poor health and wellbeing differ between various groups of people and can lead to inequalities. The physiotherapy service will work with people with MSK conditions to re-design MSK physiotherapy services to reduce inequalities.**
- **The physiotherapy service may suggest digital resources (mobile phone, email, apps, websites) to improve health in the local community, but will ensure those with limited digital access or knowledge are not disadvantaged.**



Emergency Department

Quality standard 7:

Evaluation, audit and research

MSK physiotherapy services use data to undertake evaluation, audit, research and quality improvement to understand the needs of people with MSK conditions, improve the quality of services, optimise outcomes and experience and address inequalities.

This means the physiotherapy service will...

- **Use good quality information** (data) to understand the needs of people with a MSK condition, find out how well the service is working, what effect the treatment and management has, the person's experiences of physiotherapy and check for inequalities in healthcare;
- **Collect information** (data) for a specific purpose and make sure the collection and analysis are planned;
- **Have effective systems** of recording, measuring and looking at information, and present this in a way that identifies how the quality of care can be improved;
- **Work with people** with MSK conditions to evaluate, improve and change physiotherapy services for the better;
- **Make sure good practice** and lessons learnt are shared locally, regionally, nationally and internationally;
- **Base the service on** good quality evidence and research.

What does this standard mean for me?

- **To ensure the best service and care is available**, physiotherapy services should be actively involved in evaluating their service through quality improvement, evaluation, audit and research.
- **This means people with MSK conditions** should expect the service to ask about the service they receive and whether physiotherapy helps them meet the goals of their physiotherapy plan. This is often done through the use of satisfaction surveys or questionnaires.
- **This information should be used** to identify areas for improving the service or for using treatments and procedures, which have been seen to work.
- **People with a MSK condition** have important and unique knowledge about MSK conditions and services and, should be involved in evaluation and in co-producing improvements and redesigning services and pathways.
- **Physiotherapy services** should share examples of good practice with other departments and organisations. Services for people with MSK conditions should always be informed by best practice and evidence.
- **Physiotherapy services** should make sure that evaluation, audit and research findings are shared and part of everyday practice.

Quality standard 8:

Clinical governance

MSK physiotherapy services have a clinical governance framework with a supporting set of operational policy and procedure documents to implement and monitor clinical governance.

This means the physiotherapy service will...

- **Make sure all physiotherapy staff** are familiar with their organisation's governance and anything specific to MSK services;
- **Make sure every member of staff** knows what their responsibilities are within their organisation;
- **Have procedures which lay out** in a clear and precise way how services are to be delivered and monitored;
- **Have a programme** to examine and make sure that services meet the standards expected and lead to continuous improvement;
- **Involve people with MSK conditions** in improving the service (co-production).

What does this standard mean for me?

- **Clinical governance is a system** through which healthcare organisations are accountable for continuously improving the quality of their services. It ensures a safe and effective healthcare environment for both patients and staff.
- **People with MSK conditions** should expect services to have clinical governance frameworks, with policies and procedures to ensure the service adheres to the framework.

- **Physiotherapy staff should be familiar with** the organisation's clinical governance framework and the policies and procedures of the MSK physiotherapy service. They should also know their individual responsibility in implementing clinical governance.
- **People with a lived experience** of MSK conditions, the public and communities should have the opportunity to contribute to the development of policy, planning and procedures relating to clinical governance.



You may find these links useful

NIHR Moving Forward: A guide for the public (2020) <https://evidence.nihr.ac.uk/wp-content/uploads/2020/09/Moving-Forward-FINAL-August-2020-Pages.pdf>

Health Education England (2018) Health literacy 'how to' guide <https://library.nhs.uk/wp-content/uploads/sites/4/2020/08/Health-literacy-how-to-guide.pdf>

National Institute for Health and Care Excellence (NICE) <https://www.nice.org.uk/guidance/conditions-and-diseases/musculoskeletal-conditions>

National Institute for Health and Care Excellence (NICE) 2021 Shared decision making. <https://www.nice.org.uk/guidance/ng197>

National Institute for Health and Care Excellence (NICE) 2019 Patient experience in adult NHS services <https://www.nice.org.uk/guidance/qs15>

Versus Arthritis (2016) Working with arthritis <https://www.versusarthritis.org/media/2071/working-with-arthritis-policy-report.pdf>

Patient Advice and Liaison Services (PALS) <https://www.nhs.uk/nhs-services/hospitals/what-is-pals-patient-advice-and-liaison-service/>

Patient Advice and Support Services (PASS) <https://www.careinfoscotland.scot/topics/your-rights/patient-advice-and-support-service-pass/>

The Health Foundation (2021) Quality improvement made simple: What everyone should know about healthcare quality improvement <https://www.health.org.uk/sites/default/files/QualityImprovementMadeSimple.pdf>

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